

Criminal Case Cover Sheet**U.S. District Court - District of Massachusetts**

Place of Offense:	Category No. II _____	Investigating Agency DEA _____
City <u>Lawrence</u>	Related Case Information:	
County <u>Essex</u>	Superseding Ind./ Inf. _____	Case No. _____
	Same Defendant _____	New Defendant _____
	Magistrate Judge Case Number <u>24-MJ-8155-PGL</u>	
	Search Warrant Case Number <u>24-8021-PGL, 24-8142-PGL</u>	
	R 20/R 40 from District of _____	
Defendant Information:		
Defendant Name <u>Luis Alfredo MARTE NOLASCO</u>	Juvenile: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this person an attorney and/or a member of any state/federal bar: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Alias Name <u>Eduardo ORTIZ, Eduardo ORTIZ-CALIENDO, "Miles"</u>		
Address <u>(City & State) 209 Bailey Street, Lawrence, Massachusetts 01843</u>		
Birth date (Yr only): <u>1989</u> SSN (last4#): _____	Sex <u>M</u>	Race: _____
Nationality: <u>Dominican Republic</u>		
Defense Counsel if known: _____	Address _____	
Bar Number _____		
U.S. Attorney Information:		
AUSA <u>Annapurna Balakrishna</u>	Bar Number if applicable <u>655051</u>	
Interpreter: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	List language and/or dialect: <u>Spanish</u>	
Victims: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, are there multiple crime victims under 18 USC§3771(d)(2) <input type="checkbox"/> Yes <input type="checkbox"/> No	
Matter to be SEALED: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<input checked="" type="checkbox"/> Warrant Requested	<input type="checkbox"/> Regular Process	<input type="checkbox"/> In Custody
Location Status:		
Arrest Date _____		
<input type="checkbox"/> Already in Federal Custody as of _____ in _____ .		
<input type="checkbox"/> Already in State Custody at _____ <input type="checkbox"/> Serving Sentence	<input type="checkbox"/> Awaiting Trial	
<input type="checkbox"/> On Pretrial Release: Ordered by: _____ on _____		
Charging Document: <input checked="" type="checkbox"/> Complaint <input type="checkbox"/> Information <input type="checkbox"/> Indictment		
Total # of Counts: <input type="checkbox"/> Petty _____ <input type="checkbox"/> Misdemeanor _____ <input checked="" type="checkbox"/> Felony <u>2</u> _____		
Continue on Page 2 for Entry of U.S.C. Citations		
<input checked="" type="checkbox"/> I hereby certify that the case numbers of any prior proceedings before a Magistrate Judge are accurately set forth above.		
Date: <u>3/20/2024</u>	Signature of AUSA: _____	

District Court Case Number (To be filled in by deputy clerk): _____**Name of Defendant** Luis Alfredo MARTE NOLASCO _____**U.S.C. Citations**

	<u>Index Key/Code</u>	<u>Description of Offense Charged</u>	<u>Count Numbers</u>
Set 1	<u>21 U.S.C. § 841(a)(1)</u>	Distribution and Possession with Intent to Distribute Controlled Substances	1 _____
Set 2	<u>21 U.S.C. § 841(a)(1)</u>	Distribution and Possession with Intent to Distribute Controlled Substances	2 _____
Set 3	_____	_____	_____
Set 4	_____	_____	_____
Set 5	_____	_____	_____
Set 6	_____	_____	_____
Set 7	_____	_____	_____
Set 8	_____	_____	_____
Set 9	_____	_____	_____
Set 10	_____	_____	_____
Set 11	_____	_____	_____
Set 12	_____	_____	_____
Set 13	_____	_____	_____
Set 14	_____	_____	_____
Set 15	_____	_____	_____
ADDITIONAL INFORMATION: _____			

